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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Shun-Min Chen

Examiner: Milton Nelson, Jr.

Serial No.: 10/691,983

Art Unit: 3636

Filed: October 23, 2003

Docket: 17146

For: IMPROVED HIGHCHAIR

Dated: November 18, 2004

Conf. No.: 2439

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT AND RESPONSE

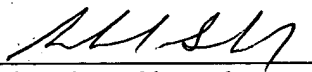
Sir:

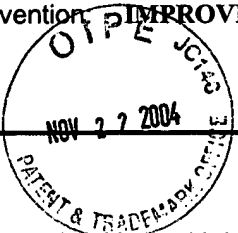
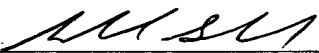
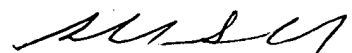
In response to the Official Action dated August 18, 2004, Applicant respectfully requests reconsideration of the above-identified application in light of the following amendments and remarks:

CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on November 18, 2004.

Dated: November 18, 2004


Aasheesh V. Shravah

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. 17146	
Applicant(s): Shun-Min Chen					
Application No. 10/691,983	Filing Date October 23, 2003	Examiner Milton Nelson, Jr.	Customer No. 23389	Group Art Unit 3636	Confirmation No. 2439
Invention: IMPROVED HIGHCHAIR					
					
COMMISSIONER FOR PATENTS:					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	6 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	2 -	3 =	0 x	\$88.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 19-1013/SSMP <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.					
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
 _____ Signature			Dated: November 18, 2004		
Aasheesh V. Shravah Reg. No. 54,445 SCULLY, SCOTT, MURPHY & PRESSER 400 Garden City Plaza - Ste. 300 Garden City, NY 11530 (516) 742-4343 AVS:jam			<div style="border: 1px solid black; padding: 5px;"> I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on November 18, 2004 _____ (Date) </div> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;">  _____ Signature of Person Mailing Correspondence Aasheesh V. Shravah _____ Typed or Printed Name of Person Mailing Correspondence </div>		
cc:					